

B6F (Official Form 6F) (12/07)

In re **Clarence B Benton**
Diana BentonCase No. **14-18102**
(if known)**AMENDED 12/29/2014****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxx5029 Capital One PO Box 85015 Richmond, VA 23285-5015	C	DATE INCURRED: 01/2013 CONSIDERATION: Credit Card REMARKS:				\$7,971.00
Representing: Capital One		Asset Acceptance, LLC 28405 Van Dyke Ave Warren, MI 48690				Notice Only
ACCT #: xxxx-xxxx-xxxx-4330 Discover Financial Svcs LLC PO Box 15316 Wilmington, DE 19850	C	DATE INCURRED: 04/1995 CONSIDERATION: Credit Card REMARKS: Discover Bank vs. Diana Benton and Doe I, Case# 11-2-22583-6, King County Superior Court				\$9,395.00
Representing: Discover Financial Svcs LLC		Krista L White & Associates, PS 1417 4th Ave, Ste 300 Seattle, WA 98101				Notice Only
ACCT #: Financial Asset Management Systems, Inc. PO Box 451437 Atlanta, GA 31145-1437	C	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx4721 First Hawaiian Bank 2339 Kamehameha Hwy Honolulu, HI 96819	C	DATE INCURRED: 07/2004 CONSIDERATION: Credit Card REMARKS:				\$2,136.00
Subtotal >						\$19,502.00
Total >						

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

5 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

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(if known)**AMENDED 12/29/2014****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Representing: First Hawaiian Bank		NCO Financial Systems, Inc. 507 PRUDENTIAL RD PO BOX 1007 HORSHAM, PA, 19044-8007				Notice Only
ACCT #: JP Morgan Chase Bank Court Orders PO Box 183164 Columbus, OH 43218-3164	C	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:				Notice Only
ACCT #: xxxxx6665 LabCorp PO Box 2240 Burlington, NC 27216-2240	C	DATE INCURRED: CONSIDERATION: Medical Bill REMARKS:				\$12.97
ACCT #: xxxxxxxxxx8320 Macys Bankruptcy Processing PO Box 8053 Mason, OH 45040	C	DATE INCURRED: 02/1999 CONSIDERATION: Credit Card REMARKS:				\$1,282.00
ACCT #: xxxx-xxxx-xxxx-3578 Nordstrom fsb PO Box 6566 Englewood, CO 80155	C	DATE INCURRED: 10/2003 CONSIDERATION: Credit Card REMARKS:				\$3,920.00
ACCT #: xxxx4712 Sallie Mae PO Box 9500 Wilkes-Barre, PA 18773	X C	DATE INCURRED: 12/2003 CONSIDERATION: Student Loans REMARKS:				\$9,411.00
Sheet no. <u>1</u> of <u>5</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$14,625.97
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total >

B6F (Official Form 6F) (12/07) - Cont.

In re **Clarence B Benton**
Diana BentonCase No. **14-18102**
(if known)

AMENDED 12/29/2014

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Representing: Sallie Mae		Asset Recovery Solutions LLC 2200 E Debon Ave Ste 200 Des Plaines, IL 60018-4501				Notice Only
Representing: Sallie Mae		National Enterprise Systems 29125 Solon Road Solon, OH 44139-3442				Notice Only
ACCT #: xxxx4712 Sallie Mae PO Box 9500 Wilkes-Barre, PA 18773	X C	DATE INCURRED: CONSIDERATION: Student Loan REMARKS:				\$29,333.81
Representing: Sallie Mae		National Enterprise Systems 29125 Solon Road Solon, OH 44139-3442				Notice Only
ACCT #: xxx3642 Stellar Recovery Inc 1327 Highway 2 Wes Kalispell, MT 59901	C	DATE INCURRED: 04/2013 CONSIDERATION: Collection Attorney REMARKS:				\$41.00
Representing: Stellar Recovery Inc		Dish Network PO Box 7203 Pasadena, CA 91109-7303				Notice Only

Sheet no. 2 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$29,374.81

Total >

(Use only on last page of the completed Schedule F.)
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B6F (Official Form 6F) (12/07) - Cont.

In re **Clarence B Benton**
Diana BentonCase No. **14-18102**
(if known)**AMENDED 12/29/2014****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxx7634 Swedish Medical Group Corporate Office 747 Broadway Seattle, WA 98122	C	DATE INCURRED: CONSIDERATION: Medical Bill REMARKS:				\$20.00
Representing: Swedish Medical Group		Swedish Medical Group PO Box 84026 Seattle, wA 98124				Notice Only
Representing: Swedish Medical Group		Swediush Medical Group Attn: Legal Correspondence PO Box 389668 Seattle, WA 98138-9668				Notice Only
ACCT #: xxxx7877 US Department of Education Bankruptcy Department PO Box 65128 St. Paul, MN 55165	X C	DATE INCURRED: 09/2007 CONSIDERATION: Student Loan REMARKS:				\$53,226.90
Representing: US Department of Education		FedLoan Servicin PO Box 69184 Harrisburg, PA 17106-9184				Notice Only
ACCT #: xxxx3697 UW PHYSICIANS PO BOX 50095 SEATTLE WA 98145-5095	C	DATE INCURRED: 10/2012 CONSIDERATION: Medical Bill REMARKS:				\$143.00
Sheet no. 3 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$53,389.90
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total >

B6F (Official Form 6F) (12/07) - Cont.

In re **Clarence B Benton**
Diana BentonCase No. **14-18102**
(if known)**AMENDED 12/29/2014****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Representing: UW PHYSICIANS		OSI Collection Services, Inc PO Box 1007 Horsham, PA 19044-8007				Notice Only
ACCT #: xxxx6550 UW PHYSICIANS P O BOX 50095 SEATTLE WA 98145-5095	C	DATE INCURRED: CONSIDERATION: Medical Bill REMARKS:				\$194.50
ACCT #: Vida Integrated Health 2014 E. Madison St. #100 Seattle, WA, 98122	C	DATE INCURRED: CONSIDERATION: Medical Bill REMARKS:				\$629.72
ACCT #: Equifax PO Box 740241 Atlanta, GA 30374-02471		DATE INCURRED: CONSIDERATION: Required Notification REMARKS:				
ACCT #: Experian PO Box 4500 Allen, TX 75013		DATE INCURRED: CONSIDERATION: Required Notification REMARKS:				
ACCT #: Internal Revenue Service PO BOX 7346 PHILADELPHIA, PA 19101-7346		DATE INCURRED: CONSIDERATION: Required Notification REMARKS:				

Sheet no. 4 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims**Subtotal >** **\$824.22**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
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B6F (Official Form 6F) (12/07) - Cont.

In re **Clarence B Benton**
Diana BentonCase No. **14-18102**

(if known)

AMENDED 12/29/2014**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: TransUnion PO Box 2000 Chester, PA 19022-2000		DATE INCURRED: CONSIDERATION: Required Notification REMARKS:				
Sheet no. 5 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$0.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total > \$117,716.90

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF WASHINGTON
SEATTLE DIVISION**

In re **Clarence B Benton**
Diana Benton

Case No. **14-18102**

Chapter **7**

**AMENDED 12/29/2014
SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	No	1	\$509,000.00		
B - Personal Property	No	5	\$335,402.78		
C - Property Claimed as Exempt	No	2			
D - Creditors Holding Secured Claims	No	2			\$553,131.29
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	No	1			\$0.00
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6			\$117,716.90
G - Executory Contracts and Unexpired Leases	No	1			
H - Codebtors	No	1			
I - Current Income of Individual Debtor(s)	No	3			
J - Current Expenditures of Individual Debtor(s)	No	4			
TOTAL		26	\$844,402.78	\$670,848.19	

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF WASHINGTON
SEATTLE DIVISION**

In re **Clarence B Benton**
Diana Benton

Case No. **14-18102**

Chapter **7**

AMENDED 12/29/2014

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$91,971.71
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$91,971.71

State the following:

Average Income (from Schedule I, Line 12)	\$7,298.30
Average Expenses (from Schedule J, Line 22)	\$7,295.73
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$9,323.85

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$38,131.29
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$117,716.90
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$155,848.19